

12-07-01

**TRANSMITTAL OF UTILITY APPLICATION
UNDER 37 C.F.R. §1.53**

Attorney Docket No.

37610-6049

First named inventor

G. Enos

Express mail label #

EL688289691US

Date of mailing

November 7, 2001j1036 U.S. PTO
10/005695

11/07/01

Application Elements

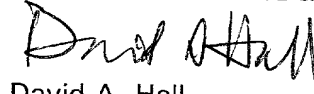
1. ☒ Fee Transmittal Form
2. ☒ Specification containing 38 pages
(including Claims and Abstract).
- a. Title: METHOD AND APPARATUS FOR
PERSONALIZED MEDICAL PRESCRIPTION SERVICES
- b. Number of claims: 27
3. ☒ 19 sheets of drawings
4. ☐ Declaration
5. ☐ Sequence Listing
- ☐ Paper copy (identical to computer copy)
- ☐ Computer readable copy
- ☐ Verified statement

Accompanying Application Papers

6. ☐ Copy of assignment documents
from parent applications
7. ☐ Preliminary Amendment
8. ☒ Return Receipt Postcard
9. ☐ Small Entity Statement

SIGNATURE OF ATTORNEY/AGENT

HELLER EHRMAN WHITE & McAULIFFE LLP



David A. Hall

Registration Number: 32,233

☒ Benefit of priority: Benefit of priority to U.S. Provisional Patent Application Serial No. 60/246,826 filed November 8, 2000. The subject matter of that patent application is incorporated into this application in its entirety.

CORRESPONDENCE ADDRESS

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11/07/01

JC674 U.S. PTO



10005695-110701

FEE TRANSMITTAL ACCOMPANYING UTILITY APPLICATION UNDER 37 C.F.R. §1.53	Attorney Docket No.	37610-6049
	First named inventor	G. Enos
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FEE CALCULATION FOR CLAIMS AS AMENDED

a)	Basic Fee			\$740/\$370	\$ 370.00
b)	Independent Claims	$\frac{4}{27} - \frac{3}{20} = \frac{1}{7}$	x \$84/\$42		\$ 42.00
c)	Total Claims	$\frac{27}{27} - \frac{20}{20} = \frac{7}{7}$	x \$18/\$9		\$ 63.00
d)	Fee for Multiple Dependent Claims	= \$280/\$140			\$ 0.00
TOTAL FILING FEE					\$ 475.00

- [X] Applicant is a small entity.
- [X] A check is enclosed in the amount of \$475.00 to cover the fee for filing the application.
- [] Charge \$ _____ to Deposit Account No. 50-1213.
- [X] The Commissioner is hereby authorized to charge any fees that may be required in this application under 37 C.F.R. §§ 1.16-1.17 during its entire pendency, or credit any overpayment, to Deposit Account No. 50-1213. If proper payment is not enclosed, such as a check in the wrong amount, unsigned, post-dated, otherwise improper or informal, or absent, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 50-1213 during the entire pendency of this application. This sheet is filed in duplicate.

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Submitted by:			
Typed or printed name	David A. Hall		Reg. Number 32,233
Signature	<i>David A. Hall</i>	Date <i>Nov. 7, 2001</i>	Deposit Account 50-1213